

**UNITED STATES PATENT & TRADEMARK OFFICE**  
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND										
1 Date of Request: <u>11/15/04</u>		2 Serial/Patent # <u>10730480</u>								
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED							
<input type="checkbox"/>	Filing		\$							
<input type="checkbox"/>	Amendment		\$							
<input type="checkbox"/>	Extension of Time		\$							
<input type="checkbox"/>	Notice of Appeal/Appeal		\$							
<input checked="" type="checkbox"/>	Petition		\$ 130							
<input type="checkbox"/>	Issue		\$							
<input type="checkbox"/>	Cert of Correction/Terminal Disc.		\$							
<input type="checkbox"/>	Maintenance		\$							
<input type="checkbox"/>	Assignment		\$							
<input type="checkbox"/>	Other		\$							
		7 TOTAL AMOUNT OF REFUND \$ 130								
10 REASON:		8 TO BE REFUNDED BY:								
<input type="checkbox"/>	Overpayment	Treasury Check								
<input type="checkbox"/>	Duplicate Payment	Credit Deposit A/C #:								
<input checked="" type="checkbox"/>	No Fee Due (Explanation):	9 <table border="1" style="display: inline-table; text-align: center;"> <tr> <td>5</td><td>0</td><td>--</td><td>0</td><td>7</td><td>0</td><td>3</td> </tr> </table>		5	0	--	0	7	0	3
5	0	--	0	7	0	3				
<u>NO FEE DUE FOR L/O PET</u>										
11 REFUND REQUESTED BY:										
TYPED/PRINTED NAME: <u>D. WOOD</u>		TITLE: <u>SR ATT</u>								
SIGNATURE: <u>[Signature]</u>		PHONE: <u>272 3231</u>								
OFFICE: <u>OP</u>										
*****										
THIS SPACE RESERVED FOR FINANCE USE ONLY:										
APPROVED: <u>[Signature]</u>		DATE: <u>11/16/04</u>								

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to: